



**USAID**  
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Atención a las Víctimas de Minas Anti-personales Afectadas por el Conflicto en Colombia

*Landmine Activities for Victims of the Conflict in Colombia*

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**YEAR 4 – THIRD QUARTERLY PERFORMANCE REPORT  
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Submitted by implementing agency:

MERCY CORPS

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## Program Summary

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**Grant Amount:** \$4,312,910

**Program Period:** Aug. 28, 2008 – April 30, 2013

**Geographic Coverage:** 22 departments total of which six priority departments include Antioquia, Norte Santander, Nariño, Caquetá, Cauca, Meta

**Number of Beneficiaries:** 600 landmine survivors, 60,890 total including PWDs

**Partner Organizations:** Servicio Nacional de Aprendizaje (SENA); Universidad Don Bosco (El Salvador)

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The opinions expressed herein are those of the author(s) and do not necessarily reflect the  
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## Acronyms

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COP	Colombian Pesos
EPS	Health Provider - Empresa Prestadora de Salud
FARC	Revolutionary Armed Forces of Colombia
FOSYGA	Social Solidarity Guarantee Fund
GOC	Government of Colombia
HUDN	University Hospital of Nariño
IDP	Internally Displaced Person
IDESAC	Departmental Health Institute of Caquetá - Instituto Departamental de Salud de Caquetá
INGO	International Non-Governmental Organization
INVIMA	National Institute for Drug Surveillance - Instituto Nacional de Vigilancia de Medicamentos
ISPO	International Society for Prosthetics and Orthotics
M&E	Monitoring and Evaluation
MC	Mercy Corps
NGO	Non-Governmental Organization
P&O	Prosthetic and Orthotic
PWD	Persons with Disabilities
SENA	National Learning Service
UDB	University of Don Bosco
USAID	United States Agency for International Development

## Executive Summary & Key Achievements

Since the beginning of the Program for Integral Assistance to Mine Victims affected by Armed Conflict, in August 2008, Mercy Corps and its partners have supported the definition and implementation of comprehensive rehabilitation processes, social and economic inclusion models, and strengthening local capacity to improve the quality of life of more than 185,000 victims of armed conflict and other people with disabilities in 14 departments of Colombia. By the establishment of strategic partnerships with local NGOs such as the *Colombian Campaign Against Mines* and *Corporación Paz y Democracia*, academic institutions as the *Don Bosco University* in San Salvador (El Salvador) and the *National Service for Apprentices - SENA*, as well as through the strategic work done with government bodies and public institutions at the national and departmental level, 46,335 vulnerable persons such as IDPs, victims of landmines and other remnants of war, and other victims of armed conflict, have gained access to health services and physical rehabilitation, income generation initiatives and basic vocational and technical training in different disciplines.

In terms of health and rehabilitation for victims of armed conflict, the two rehabilitation centers established by the Program in the departments of Nariño (Hospital Universitario Departamental de Nariño - Pasto) and Caquetá (Hospital María Inmaculada - Florencia), have provided services to over 140,000 people in the departments of influence (Nariño, Putumayo, Cauca, Huila, Caquetá) over the past three years, and we expect that in the next five years they will provide opportunities for access to these type of services to more than a quarter of a million citizens with disabilities. This achievement, coupled with the formal on-line trainings of prosthetists and orthotists located in 14 mid-level cities, has demonstrated the possibility of transferring high quality services and technical capacity closer to affected communities and vulnerable population therefore reducing social and economic costs associated with these services.

As mentioned in previous reports, the technical and financial support that Mercy Corps has provided to over 200 landmine survivors and their families through the socioeconomic inclusion component of this program has demonstrated the ability of victims of the conflict to develop resilience strategies, and has clearly generated measurable and efficient tools to for vulnerable persons to thrive, even in the most complex environments. Due to the sustained follow-up efforts and the partnerships established with public and private sectors in six departments, 72% of the income-generation initiatives that were funded with USAID resources are active, and represent a sustainable source of income for recipient families. Furthermore, the model designed and implemented by Mercy Corps and its partners has proven to be an effective psychosocial tool, given that the emphasis of the methodology is focused not only in the generation and success of business and income, but mostly in creating opportunities for social interaction and welfare of individuals, families and communities.

During this reporting period, Mercy Corps focused on supporting prostheticians/orthoticians who are beneficiaries of the Integral Victims' Assistance Program, not only with regard to their academic processes, but also in the aim of building and strengthening capacity for the fulfillment of legal requirements for the provision of quality services. These services include adequate facilities, professional personnel and other requirements stated in the *Prosthetics and Orthotics Good Practices Manual* and Resolution 1319, which regulates these types of services.

Mercy Corps continues to provide technical support to the Ministry of Health of Colombia in order to guarantee a participatory process for the reformulation and implementation of the Resolution 1319/2010. Four meetings with key stakeholders including users of prosthetics and orthotics devices, other people with disabilities, prostheticians and orthoticians and health authorities were held during the past three months, in order to promote an inclusive approach to developing public policies for the rights of people with disabilities.

Mercy Corps has supported the development of monitoring mechanisms for services provision at all prosthetics and orthotics laboratories that are benefitted by the program. These activities will not only enable USAID to have a clearer picture of the number of beneficiaries, but will also generate a pilot for the exact recording of mobility devices manufactured in Colombia.

## Indicators

### 1.1. Leahy Fund Indicators for this quarter

Indicator	2009-2011 Cumm.	Achievements Q1Y'12***	Achievements Q3Y'12*	Cumulative 2012	2009-2012 Cumm.
Number of persons trained	1,362	155	0	155	1,517
Number of persons served	186,620	158	0	158	186,778
Number of institutions strengthened	128	2	0	2	130

\*Progress on indicators will be reported during the following quarter upon adjustments to PMP and Mission approval for years 4-5

### 1.2. Program Indicators for this Quarter

Indicator	Description of Indicator	LoP Goal	Achievements Q1 FY'12	Achievements Q3 FY'12*	Cumulative 2009-2012	% of Adjusted LoP
1	Number of persons from mine/armed conflict-affected communities that increase their capacity as first responders to mines/UXO and other ERW related emergencies.	630	150	0	807	128%
2	Number of landmine survivors, people with disabilities, and other victims of armed conflict who access rehabilitation services at the two new rehabilitation centers established in Caquetá and Nariño.	38,209	158	0	128,242	335%
3	Number of health care staff employed by the Hospital Maria Inmaculada and Hospital Universitario de Nariño rehabilitation centers that have been trained in specific needs of beneficiaries and that provide assistance.	30	1	0	40	133%
4	Number of Colombian P&O technicians trained and certified as Cat II technicians by ISPO.	30	5	0	35	116%
5	SENA has the technical capacity and suitable methodologies to train new P&O technicians that comply with International quality standards by ISPO.	3	0	0	3	100%
6	Number of socioeconomic working groups established and coordinating activities in order to strengthen socioeconomic initiatives with landmine survivors.	6	0	0	4	67%
7	Number of landmine survivors and their families that access income generation initiatives that improve their quality of life.	200	2	0	202	101%
8	Number of Departmental Committees for Integrated Mine Action that have defined work plans and information flowcharts for integrated assistance to landmine survivors and advocacy related to mine action public policies.	6	1	0	6	100%
9	Number of health care providers that improve management practices thereby increasing access to health care and rehabilitation services to landmine survivors, victims of armed conflict and other people with disabilities.	6	0	0	45	750%

\*Progress on indicators will be reported during the following quarter upon adjustments to PMP and Mission approval for years 4-5

### 1.3. Mission Indicators for this Quarter

Performance Indicators	LoP Goal	2011 (AWP target)	2009-2011 Cumm.	Q1FY'12	Q2FY'12***	Q1(AWP Target)	Q1/AWP Goal %	Cumm. 2012	2009-2012 Cumm.	% Cumm./LoP Adj
<b>1. Vulnerable persons benefitted</b>	<b>17.160</b>	<b>5.259</b>	<b>46.335</b>	<b>239</b>	<b>0</b>	<b>0</b>	<b>n,a</b>	<b>239</b>	<b>46.574</b>	<b>271,4%</b>
IDPs benefitted	-	-	587	0	0	0	n,a	0	587	n.a
Landmine survivors benefitted	600	0	1.011	0	0	0	n,a	0	1.011	168,5%
Other persons with disabilities	16.560	5.563	45.324	189	0	0	n,a	189	45.513	274,8%
Afro-Colombians assisted	18	0	107	0	0	0	n,a	0	107	594,4%
Indigenous assisted	18	0	196	50	0	0	n,a	50	246	1366,7%
<b>2. Socio-Economic reintegration</b>	<b>370</b>	<b>174</b>	<b>1.362</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>n,a</b>	<b>6</b>	<b>1.368</b>	<b>369,7%</b>
Jobs created	175	45	436	1	0	0	n,a	1	437	249,7%
Jobs strengthened	195	129	927	0	0	0	n,a	0	927	475,4%
Beneficiaries graduating from vocational training****	33	27	15	5	0	0	n,a	5	20	60,6%
Beneficiaries with access to education	85	64	184	0	0	0	n,a	0	184	216,5%
<b>3. Health</b>	<b>38.209</b>	<b>0</b>	<b>184.140</b>	<b>378</b>	<b>0</b>	<b>0</b>	<b>n,a</b>	<b>378</b>	<b>184.518</b>	<b>483%</b>
Beneficiaries with access to health care	534	0	653	189	0	0	n,a	189	842	158%
Beneficiaries with access to rehabilitation services (survivors + family members + other persons with disabilities)**	38.209	0	184.140	189	0	0	n,a	189	184.329	482,4%
<b>4. Public Policy</b>	<b>720</b>	<b>265</b>	<b>1.106</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>n,a</b>	<b>0</b>	<b>1.106</b>	<b>153.6%</b>
Persons benefitted from institutional strengthening	720	265	1.106	0	0	0	n,a	0	1.106	153.6%
<b>5. Other Indicators</b>									<b>0</b>	
Private sector funds leveraged (US \$000) *(1)	-	-	\$ 108,00	\$ 0,00	\$ 0,00	\$ 0,00	n,a	0	\$ 108,00	n.a
Public Sector funds leveraged (US \$000)	-	-	\$ 296,90	\$ 0,00	\$ 0,00	\$ 0,00	n,a	0	\$ 296,90	n.a
Women beneficiaries	2.768	564	5.166	0	0	0	n,a	0	5.166	186,6%
Men beneficiaries	10.397	0	14.379	0	0	0	n,a	0	14.379	138,3%
Children beneficiaries	2.768	1.654	2.161	0	0	0	n,a	0	2.161	78,1%
People trained	1.890	1.178	1.345	155	0	0	n,a	155	1.500	79,4%

\*(1) TRM: 1,810

\*\*The calculation of this indicator is the projection of direct beneficiaries (Rehabilitation Center), multiplied by the average family (4 people)  
The Target to Q1 will be defined by USAID in the second Quarter of 2012.

\*\*\* Progress on indicators will be reported during the following quarter upon adjustments to PMP and Mission approval for years 4-5

\*\*\*\*The indicator refers to students undergoing Prosthetics and Orthotics Technologist Program with University Don Bosco and SENA

## 1. Progress Towards Objectives

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Program objectives are outlined below with progress made between April 1<sup>st</sup> and June 30<sup>th</sup>, 2012 by *Result* and *Activity*.

**Objective 1:** Landmine survivors, victims of armed conflict and other persons with disabilities in the departments of Antioquia, Caquetá, Cauca, Meta, Nariño and Norte de Santander have better quality and access to rehabilitation services by the end of the Program.

**Result 1.3.** Increased national capacity to provide quality prosthetic and orthotic (P&O) services, according to international standards.

**Activity 1.3.1.** Training of 30 P&O technicians from the departments of Antioquia, Caquetá, Cauca, Meta, Nariño and Norte de Santander through on-line distance learning courses.

The training process of Colombian prostheticians and orthoticians continues to develop normally and according to the expectations of the program. Currently, 21 students are taking classes from Module 3 and four more are advancing on Module 2, for a total of 25 students enrolled in the program for this academic period.

As reported in previous periods and in the aim of seeking higher territorial impacts, the program has supported 40 prosthetists/orthotists, of which 10 have left the program either by voluntary reasons (5) or poor academic performance (5).

As part of regular follow-up, the program's Health and Rehabilitation Coordinator has accompanied the academic processes of the students, both through phone calls and Skype conferences as well as through technical visits in the field. Each student has been contacted at least in two occasions during the reporting period in order to assess their general academic needs and difficulties. While seven students are still struggling with implementing studying techniques and organizing their time in an efficient way to match working, personal and academic responsibilities, all others (18) have already acquired habits that enable them to take a better advantage of the training and have shown to be able to apply their new knowledge in a more logical and systematic way. It is also clear that many basic gaps in areas such as pathology and anatomy have been overcome. It is, however, evident that the lack of supporting materials such as audiovisual aids, technical dictionaries, specific bibliography and specialized tutoring support slows the progress in cognitive processes.

As reported in the previous period, five students were required to formulate practical and academic strengthening plans. Mercy Corps has been closely following the plans of these students, who passed the second training module in the prior semester. So far, all students have generated research strategies that have allowed them to overcome their academic gaps and are ready to defend its progress to the group of evaluators from the University Don Bosco in July 2012.

Regarding the five students who are repeating the second training module (lower limb prosthesis), Mercy Corps has supported the selection of amputees that will serve as models for the examination process. The cases have been subject to clinical examinations with physiatrist and P&Os and one specific agreement was achieved with the disability unit of the



Photo 1: Mercy Corps' Health and Rehabilitation Coordination supports the learning process of a P&O student Florencia, Caquetá. April, 2012

municipality of Soacha, increasing the social impact of the project.

### **Follow – up to Resolution 1319 (Prosthetics and Orthotics Good Practices Manual)**

In the spirit of supporting public policy efforts to improve prosthetic and orthotic services in Colombia, Mercy Corps has continued to lead the exercise of reformulation of Resolution 1319/2010 (Good manufacturing practices for Prosthetics and Orthotics). In this context, Mercy Corps has supported design and implementation of the reformulation process, guaranteeing broad participation of stakeholders, not only at the level of Bogotá, but most important, at regions like Caquetá, Nariño and Cauca (among others) where people with disabilities experience difficulties accessing P&O services.

Four participatory meetings were held during this reporting period. All of the meetings were jointly organized with members of the Quality Direction of the Ministry of Health, and participation was requested from the Social Participation Direction (Disability Group) of this same institution. The National Drugs Surveillance Institute (Invima) and the Guarantees and Solidarity Fund (FOSYGA) were also recurrently invited to participate, given their roles and mandates. Then referenced the agendas of meetings and results are presented below:

<b>Date</b>	<b>Agenda Items</b>	<b>Results and Commitments</b>
03/05/2012	<p><b>Review of the actual state of Prosthetics and Orthotics offer in Colombia</b></p> <p>Venue: Ministry of Health</p> <p>Institutions participating:            SENA (Servicio Nacional de Aprendizaje)            Ministry of Health – Disability group            Ministry of Health – Direction of Quality            Ministry of Health - Quality of Services            National University – Health Department            Mercy Corps            ICRC – International Committee of the Red Cross.            TIMDO            Colombian Campaign Against Landmines</p>	<p>The National University shared the results of the study made by the University in cooperation with the Ministry of Social Protection in 2007. There has been no update of this study.</p> <p>Mercy Corps presented the baseline of its projects related to P&amp;O. It is the most updated document in the field in Colombia.</p> <p>The Ministry on Health and other 11 participants agreed on the need to have an updated state of the art in P&amp;O, in accordance with international standards (ISPO – WHO).</p>
28/05/2012	<p><b>Critical analysis of Resolution 1319 regarding requirements and context analysis.</b></p> <p>Venue: Ministry of Health</p> <p>Institutions participating:            SENA (Servicio Nacional de Aprendizaje)            Ministry of Health – Direction of Quality</p>	<p>Prostheticians presented their constraints to fulfilling several of the Resolution's requirements, specifying those related to education and international certifications.</p> <p>Laboratories showed the difficulty of complying with the resolution without clear norms and guidelines related to types of equipment and infrastructure. Among the main issues expressed in the meetings where:</p> <ul style="list-style-type: none"> <li>Academic situation of empirical P&amp;O technicians towards the requirement of certification of Level II: In this regard,</li> </ul>

	Ministry of Health - Quality of Services Mercy Corps ICRC – International Committee of the Red Cross. Colombian Campaign Against Landmines. INVIMA – Instituto Nacional de Vigilancia de Medicamentos	P&Os asked for clarification about the training, opportunities in the future, as well as for the recognition of qualifications and academic degrees obtained outside the country. <ul style="list-style-type: none"> <li>• Articulation of P&amp;O labs and professionals with other health providers: There is an urgent need to regulate the proper articulation of prosthetists and orthotist to clinic rehabilitation teams (physical therapists, orthopedists, physiatrists, etc...) in order to guarantee integral rehabilitation plans and programs. This includes the revision of legal requirement to occupational therapists and other specialist.</li> <li>• Classification of P&amp;O laboratories and other related shops: P&amp;O professionals expressed concern regarding the fact that many of the establishments are registered with the INVIMA product distribution stores, but not laboratories.</li> </ul>
04/06/2012	<b>Analysis of concerns and perceptions of users of prosthetic and orthotic devices on Resolution 1319</b>  Venue: Ministry of Health  Institutions participating: SENA (Servicio Nacional de Aprendizaje) Ministry of Health – Direction of Quality Ministry of Health - Quality of Services Mercy Corps ICRC – International Committee of the Red Cross. Colombian Campaign Against Landmines	The low participation of users' associations at the meeting is evidence of the limited capacity of the Ministry of Health to interact with amputees and other people with disabilities, as well as the lack of socialization of the Resolution 1319 among persons who require prosthetic and orthotic devices.  Participants manifested their agreement with the need of the resolution and said that they consider it to be good for their interests, since it will clearly improve the quality of the assistance and availability of prosthetic services at regional levels.

While there is a clear commitment from the Quality Direction at the Ministry of Health, it is also evident that the disability group from the Social Participation Direction is not yet clear about how to interact with people with disabilities to guarantee quality services, and is still struggling with issues such as a PWD census, or a categorization system. Required information such as an assessment of services' offer at a departmental level or a minimal training for INVIMA and PWD officers in departmental capitals, therefore, has not even been considered. It is important to consider the need for specific planning and training efforts to build the capacity of the Ministry of Health in order to guarantee sustainability of actual policy developments.

#### Specific Support to P&O laboratories

In support of the primary objective of the program and the support needs to the P&O laboratories at the field level, Mercy Corps has continued its visits and has supported the development of P&O service and quality improvement plans to help the laboratories comply with Resolution 1319 Requirements. During this reporting period, Mercy Corps visited the P&O laboratory Avanzar 2, in Florencia Caquetá.



As one of the most evident results of the technical assistance received from Mercy Corps, two Prosthetists implemented the following activities to meet the legal requirements contemplated under Resolution 1319/2010:

- Change of venue: Since its previous location did not provide the minimum guarantees for the provision of services established in resolution 1319, the owners of the laboratory changed its premises to a more spacious place where they have sufficient space for supply storage, adaptation and fitting of prosthetic and orthotic devices, and for the required machinery. Although space is still precarious and shared with housing, improvement of conditions for the provision of services is observable.
- Elaboration of protocols and documentation: The lab owner is aware of the minimum required documentation, such as organizational chart, functional charts, staff terms of reference and technical master plans. However, there is not enough capacity at the laboratory to develop these tasks as required by Resolution 1319.
- Liaison with health authorities and providers: Avanzar 2 has a strategic plan for liaising with the health department of the department of Caquetá and María Inmaculada Hospital of Caquetá. The hospital manager has agreed to support the integration of P&Os to the rehabilitation services of the institution, through joint medical rounds and patient evaluations. This commitment must be confirmed through agreements during the second half of 2012.

## **2. Monitoring and Evaluation**

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Mercy Corps focused monitoring and evaluation activities in two areas this quarter:

First, continued technical training was provided by the M&E Coordinator to the prosthetists / orthotists students who are participants in the ISPO Category II online training program. Methods and tools for data collection, systematization, quality control, analysis and reporting were developed to manage information regarding services provided in their laboratories. The objective is to capture data on the number of people with disabilities that benefit from their new P&O technical knowledge and for laboratories to develop their internal capacity and systems to monitor patient assistance activities.

Sixteen P&O students from 11 laboratories have received initial training and follow-up support during field visits and Skype conferences calls. An important result is that they are all now using the same unified methods and tools for recording data on patients and P&O services. So far, data and results from the 16 P&O students and 11 laboratories show a significant level of services provided. This data will be consolidated and reported in the next quarter.

Secondly, the Mercy Corps Design, Monitoring, and Evaluation Unit and COP finalized the Program Monitoring Plan and Indicator Reference Sheets adjusted for YR 4-5. Indicators include the number of students who are registered in the online program, are ISPO Category II certified, and the number of people who have benefitted from P&O services. The PMP and Indicator Reference Sheets have been sent to USAID and are under review.

### 3. Conclusions

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Conclusion 1: Regarding the academic and technical development of orthotists/prosthetists who are beneficiaries of the program, it is clear that the direct support provides immediate positive results. It is, therefore, desirable to increase the chances of accompanying academic processes to improve educational outcomes for all students.

Conclusion 2: Mercy Corps has repeatedly emphasized the need for an increased regular technical interaction and support to beneficiaries, preferably during the academic periods. This kind of support is required in order to correct flaws in practice prior to the classroom evaluations. It is important to consider, however, that human resources for these processes are very rare in the country, and its implementation would require different strategies or shared value alliances that clearly require a greater need for time and budget.

Conclusion 3: As has been stated in the past, the process of academic training in prosthetics and orthotics is vital to improve the quality and availability of comprehensive rehabilitation services at the regional level. It is, however, important to consider the needs of business improvement, both in relation to the acquisition and/or upgrade of machinery and management and marketing skills.